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Docket No.: R2184.0091/P091-A
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Hiroshi Maegawa

Application No.: 10/758,136⁵

Group Art Unit: 2655

Filed: January 16, 2004

Examiner: Nabil Z. Hindi

For: OPTICAL PICKUP DEVICE,
INFORMATION
REPRODUCTION/RECORDING
APPARATUS, AND INFORMATION
PROCESSING APPARATUS

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Dear Sir:

In response to the Office Action dated July 16, 2004 (Paper No. 20040715),
please amend the above-identified U.S. patent application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims beginning on
page 3 of this paper.

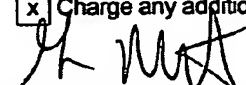
Remarks begin on page 6 of this paper.

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AMENDMENT TRANSMITTAL LETTER				Docket No. R2184.0091/P091-A	
Application No. 10/758,135	Filing Date January 16, 2004	Examiner N. Z. Hindi	Art Unit 2655		
Applicant(s): Hiroshi Maegawa					
Invention: OPTICAL PICKUP DEVICE, INFORMATION REPRODUCTION/RECORDING APPARATUS, AND INFORMATION PROCESSING APPARATUS					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	4	- 20 =		x	0.00
Independent Claims	4	- 3 =	1	x 88.00	88.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					88.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____ A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1073</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 _____ Gianni Minutoli Attorney Reg. No.: 41,198				Dated: <u>October 13, 2004</u>	
DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP 2101 L Street NW Washington, DC 20037-1526 (202) 861-9191					